

<h1 style="margin: 0;">CLAIMS ONLY</h1>				Application Number <div style="font-size: 24pt; font-family: cursive;">10806970</div>		Filing Date	
				Applicant(s)			
* May be used for additional claims or amendments							

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	2					
Total Depend	2					
Total Claims	4					

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	Indep	Depend	Indep	Depend
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Total Indep				
Total Depend				
Total Claims				